2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Mailing Address

3. Mailing Address

City & State

ARCADIA FL 34269 US

Suite, Apt. #, etc.

3360 SW COUNTY ROAD 769

DOCUMENT # N9400004083

1. Entity Name

Principal Place of Business

ARCADIA FL 34269

Suite, Apt. #, etc.

City & State

3360 SW COUNTY ROAD 769

2. Principal Place of Business

ARISE & SHINE EVANGELISTIC ASSOCIATION, INC.



FILED
Apr 10, 2006 8:00 am
Secretary of State
04-10-2006 90309 042 ****61.25

1st MOORE CR2E037 (10/05)

4. FEI Number 65-0524235 Additional Fee Required

7. Name and Address of New Registered Agent

O. Box Number is Not Acceptable)

Zio Country Zip Country 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FLEMING, EDWARD P Street Address (P.O. Box Number is Not Acceptable) 4300 BAYOU BLVD SUITE 12 & 13 PENSACOLA FL 32503-1009 Zip Code City 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. 4 % SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. PDCM TITLE ☐ Delete TITLE WOOD: DIRK NAME NAME E3 WESTLODGE, PINETREE AVE. STREET ADDRESS STREET ADDRESS CLAREMONT 7745 W. CAPE S. AF City-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition SAME, STEVE NAME NAME STREET ADDRESS 32 ROTHERHITHE NEW ROAD STREET ADDRESS CITY-ST-ZIP LONDON SE CITY-ST-ZIP SD Detete TITLE TITLE Addition RANDALL, MARK NAME NAME STREET ADDRESS POST OFFICE CABUYAO STREET ADDRESS CITY-ST-ZIP 4025 LAGUNA PH CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition LOGAN, CRAIG NAME STREET ADDRESS POST OFFICE CABUYA STREET ADDRESS CITY-ST-ZIP 4025 LAGUNA PH CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE THOMAS, ROBERT F NAME MARKE 3360 SW COUNTY ROAD 769 STREET ADDRESS STREET ADDRESS ARCADIA FL 34269 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

F. Ohence Robert F. THOMAS

April 4,2006 8634946477